File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

2010 OCT 20 AH 9: 14 USPS 10/18

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COMMITTEE NAME (Must be same as on Statement of Org	anization)			1
Committee to Re-elect Helen Miller	, ,		FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate ((4)County Central Committee (5)County Candidate (6)City Cand Subdivision Candidate (8)County PAC (9)City PAC (10)School 11) Local Ballot Issue	2)State PAC (3)State Party	. (E	DR-2 Rev. 12/2009) or Office Use On	
CANDIDATE COMMITTEES ONLY: Candidate Name Helen Miller Office Sought Representative	Political Party (if applicable) Democratic District (if Senate or House) 49th	Se Co	ogged in S canned omputer	
Late reports are subject to possible civil and criminal penalties. Pucandidate's committee, and the chairperson, for any other type of committee of the chairperson o	rsuant to lowa Code sections 68B.32A committee, is the individual responsible 515-955-8301 TELEPHONE	(7) and 68/e for filing ti	A.401(3), the car mely and accura DATE SI	didate, for a te reports.
I AM FILING A October 14, 2010	REPORT FOR (1) ELECTION	/(2)NON-I	ELECTION YEA	AR.
(report date)	Indicate by	# 1		
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter Dat	n of Election
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed	.)	County & Lo which Elect	ocal Committees, ion is held	enter County in
STATEMENT OF CASH ON HAND				
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is file.)	ash on hand at the end	\$	5,625.93	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedu	ule A) (*also see in-kind below)		10,715.00	
Schedule F: Loans Received total (Attach Schedule	F)			
Schedule H: Total Sales of Campaign Property (Atta	ch Schedule H)			
(Schedule H applies to Candidates' Comm	<u>nittees Only)</u> SUB-TOTAL	•	16,340.93	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		•••••••••••		
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)		10,040.35	
Schedule F: Loan Repayments total (Attach Schedul	•			
CASH ON HAND at the end of this reporting period (if final rep			6,300.58	
*UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched	lule E)	\$	195.00	
*OUTSTANDING LOANS (From Schedule F - Attach Schedul				
CONSULTANT BREAKDOWN (Schedule G Attached?)			YESN	10
CANDIDATE COMMITTEES ONLY:				
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	ch Schedule H)	\$	2,115.44	

<u>\$TATE COMMITTEES:</u> Submit a reconciled campaign account bank statement in January of each year.

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)	. —	CK THIS BOX IF NDING FORM
Committee to Re-elect Helen Miller	1	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/27/10	ID# CK# _{cash}	miscellaneous contributions		\$30.00	1
7/27/10	ID# CK# 3000020286	Carlos Venable-Ridley 3420 Garretson Ave Sioux City, IA 51106		25.00	1
7/27/10	ID# CK# 8309	Thomas & Becky Johnson P O Box 1045 Centerville, IA 52544		100.00	1
7/27/10	ID# CK# 9052	Svana Lamb 2912 18th Ave No Fort Dodge, JA 50501		40.00	1
7/27/10	CK# ₁₇₉₇	Al & Jean Borszich 803 N 21st St Fort Dodge, IA 50501		40.00	1
9/3/10	ID# 6021 CK# 002576	Credit Union Political Action Committee P O Box 10409 Des Moines, IA 50306		500.00	1
9/3/10	ID# CK# ₉₀₇₈	Nancy Stanek 2826 N 25th St Fort Dodge, IA 50501		100.00	1
9/3/10	ID# CK# ₆₉₉₃	Tim & Deb Kelleher 2653 4th Ave No Fort Dodge, IA 50501		25.00	1
9/3/10	1D# 6060 CK# 2704	AFL-CIO Committee on Political Education 2000 Walker, Suite A Des Moines, IA 50317		200.00	1
9/3/10	ID# CK# 8698	Cheryl O'Hern P O Box 120 Fort Dodge, IA 50501		50.00	1
			SUB-TOTAL		

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Page 1 of 7 (for Schedule A)

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(Including candidate's personal funds)	(Rev. 07/03)	MONETARY
COMMITTEE NAME (Must be same as on Statement of Organization) Committee to Re-elect Helen Miller		ECK THIS BOX IF ENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
9/3/10	ID# CK# ₅₈₅₉	M J Maggio 815 Northwood Ave Fort Dodge, IA 50501		\$50.00	INCOME
9/3/10	ID# CK# 8698	Sandy Struecker 621 E Street Fort Dodge, IA 50501		50.00	1
9/3/10	ID# CK# 1812	Delores Garst 1402 12th Ave No Fort Dodge, IA 50501		75.00	1
9/3/10	ID# CK# 6028	Gwenda Naylor P O Box 40 Fort Dodge, IA 50501		25.00	1
9/3/10	ID# CK# 5677	Charlene Washington 1212 10th Ave SW Fort Dodge, IA 50501		25.00	1
9/3/10	ID# CK# 7465	Clay & Katherine Beggerly 2028 Gordon Pass Fort Dodge, IA 50501		150.00	1
9/3/10	ID# CK# 5095	Doug & Pam Sanders 1127 N 4th St Fort Dodge, IA 50501		50.00	1
9/3/10	ID# 6004 CK# ₄₉₉₅	Assoc Gen Contractors of IA PAC 701 E Court Ave Des Moines, IA 50309-4941		2,500.00	1
9/3/10	ID# CK# 1108	Judge Brown 506 4th Ave So Fort Dodge, IA 50501		100.00	1
)/3/10	CK#	Susan Hayden 1910 2nd Ave No Fort Dodge, IA 50501		100.00	1
			SUB-TOTAL	\$ 3,125.00	

TOTAL (if last page of this schedule)

of (for Schedule A)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the *Discosure law requires canoidate committees to discose the relationship or any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds) A MONETARY (Rev. 07/03) RECEIPTS		Keset rorm a		
AMENDING FORM	CONTRIBUTIONS MONEY TAKEN IN		A (Rev. 07/03)	
	COMMITTEE NAME (Must be same as on Statement of Organization) Committee to Re-elect Helen Miller			

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

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DATE RECEIVED (MIM/DD/YR)	PAC ID NUMBER (if applicable) ANID PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
9/3/10	ID# CK# ₄₆₆₆	Dennis & Darlene Baugh 6422 Twin Lakes Rd Manson, IA 50563		\$50.00	INCOME.
9/3/10	ID# CK# 8140	Daryl & Joann Beall 1928 N 22nd St Fort Dodge, IA 50501		50.00	1
9/3/10	ID# CK# 1996	Al & Jean Borszich 803 N 21st St Fort Dodge, IA 50501		50.00	1
9/3/10	ID# CK# 5529	Dave & Linda Hearn 1264 7th Ave No Fort Dodge, IA 50501		50.00	1
9/3/10	CK# 1052	Jane Burleson 207 Central Ave Fort Dodge, IA 50501	·	50.00	1
9/3/10	ID# CK# 8427	Ruth Edwards 1909 7th Ave No Fort Dodge, IA 50501		25.00	1
9/3/10	ID# CK# ₇₀₈₈	Lois Dencklau 2021 N 14th Ct #4 Fort Dodge, IA 50501		50.00	1
9/3/10	ID# CK# cash	Jon Vessey 1029 6th Ave No Fort Dodge, IA 50501		25.00	1
9/3/10	ID# CK# 7517	Shirlee Trent 2527 22nd Ave No Fort Dodge, IA 50501		25.00	1
9/3/10	ID# CK# cash &	Tom Salvatore 1053 N 23rd Place Fort Dodge, IA 50501		20.00	1
			SUB-TOTAL	s 395.00	
		TOTAL (if last j	age of this schedule)		

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Page 3 of 7 (for Schedule A)

For Instructions, See Back of Form	Reset Form	SCHEDULE	1
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Committee to Re-elect Helen Miller		. —	CK THIS BOX IF NDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/3/10	ID# CK# ₃₂₅₃	Donni Mitchell 819 3rd Ave So Fort Dodge, IA 50501		\$25.00	1
9/3/10	ID# CK# 6528	Larry Mitchell 819 3rd Ave So Fort Dodge, IA 50501		25.00	1
9/3/10	ID# CK# 7660	Loran & Josephine Fletchall 1614 Kantor Ave Webster City, IA 50595		15.00	1
9/3/10	ID# CK# 1728	Ed & Betsy O'Leary 1604 N 13th St Fort Dodge, IA 50501		100.00	1
9/3/10	ID# CK# 9146	Jerry & Sandra Patterson 2019 Highland Park Ave Fort Dodge, IA 50501		25.00	1
9/3/10	ID# CK# 4511	Tom & Norma Schmoker 2290 170th St Fort Dodge, IA 50501		45.00	1
9/3/10	ID# CK# ₅₅₀	William Bagwell 352 SW 62nd Blvd., No. 6 Gainesville, FL 32607		100.00	V
9/3/10	ID# CK# ₉₅₄₁	James & Nola Humes 1721 River Forest Dr Fort Dodge, IA 50501		50.00	1
9/3/10	ID# CK# 5504	James & Diane Patton 106 E Austin St Rockwell City, IA 50579		25.00	1
9/3/10	ID# CK# 6665 ^a	John Ludgate 2320 6th Ave No - Apt 113 Fort Dodge, IA 50501		25.00	1
			SUB-TOTAL	\$ 435.00	

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Page 4 of 7 (for Schedule A)

For Instructions, See Back of Form			
The state of the s	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Committee to Re-elect Helen Miller			CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

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9/3/10	ID# CK# ₁₀₂₅	Iowa Renewable Fuels Association PAC		\$250.00	✓
9/3/10	ID# 6116 CK# 1886	Iowa Dealers PAC 1311 50th Street Fort Dodge, IA 50501		200.00	1
9/3/10	ID# 6069 CK# 2691	Iowa Industry PAC 904 Walnut, Suite 100 Des Moines, IA 50309		250.00	1
9/23/10	1D# 8416 CK# 1146	Iowa Corn Growers Association 5505 NW 88th St, #100 Johnston, IA 50131-2948		1,000.00	1
9/23/10	CK# ₅₀₀₅	Mr. & Mrs.Kermit Smith 2327 20th Ave No Fort Dodge, IA 50501		50.00	1
9/23/10	ID# CK# 5371	Dr. Felix Gallagher 5301 SE 29th Ct Des Moines, IA 50320		100.00	
9/23/10	ID# CK# ₅₈₁₄	Maynard & Barbara Boatwright 2331 East 39th Court Des Moines, IA 50317		50.00	
9/23/10	CK# ₆₃₁₄	Susan Josten 14067 S Shore Dr Clive, IA 50325		25.00	
9/23/10	ID# CK# 809	Michael Traxinger 11409 411th Ave Claremont, SD 57432		25.00	
9/23/10	ID# CK# \$ 1035	Kale Vanbruggen 5925 Co Rd 60 Litchville, ND 58461		25.00	
			SUB-TOTAL	s 1,975.00	

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Page 5 of 7 (for Schedule A)

For Instructions, See Back of Form			
	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN	and a SE ASSESSMENT AND A SECURITY OF	Α	MONETARY
. (Including candidate's personal funds)		(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF
Committee to Re-elect Helen Miller		AME	NDING FORM

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9/23/10 CK\$_1275 Jacob Butcher 2680 N. 2350 East Rd Mount Auburn, IL 62547	DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
10# Ck# 4694 Charles Isenhart P O Box 3353 Dubaque, IA 52004	9/23/10		2680 N. 2350 East Rd		\$25	INCOME
10# Dr & Mrs. John Calisesi 1945 15th Ave No Fort Dodge, IA 50501 Fort Dodge, IA 50265 Iowa Committee on Automotive Retailers PAC 1110 Office Park Rd. West Des Moines, IA 50265 Iowa Committee on Automotive Retailers PAC 1110 Office Park Rd. West Des Moines, IA 50265 Iowa Chiropractic Society PAC Iowa Chiropractic	9/23/10	CK# 4694	Charles Isenhart P O Box 3353		50.00	V
9/23/10	9/23/10	ID# CK# 2240	Dr & Mrs. John Calisesi 1945 15th Ave No		50.00	1
10# 6059 Iowa Committee on Automotive Retailers PAC 1111 Office Park Rd West Des Moines, IA 50265	9/23/10	CK# 1090	Nicholas Maines 415 Center St., Apt. 3		50.00	1
10 10 10 10 10 10 10 10	9/23/10	CK# ₃₅₂₂	Iowa Committee on Automotive Retailers PAC 1111 Office Park Rd.		200.00	1
9/23/10	9/23/10	CK# 1727	John Daniel 1114 Central Ave		50.00	1
9/23/10	9/23/10	6058 CK# ₄₇₇₂	Iowa Chiropractic Society PAC 100 East Grand Ave. Suite 240		100.00	4
9/23/10	9/23/10	6064 CK# ₃₁₁₈	Iowa Friends of Rural Electrification PAC 8525 Douglas, Suite 48		500.00	1
9/23/10 ID# 6070 Iowa LawPAC 250.00 ✓	9/23/10	6073 CK# 1682	Iowa Medical PAC 1001 Grand Avenue		250.00	
\$ 1,525.00	9/23/10	6070 CK# *	Iowa LawPAC 625 East Court Ave		250.00	4
· · · · · · · · · · · · · · · · · · ·			•		\$ 1,525.00	

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Page 6 of 7 (for Schedule A)

For Instructions, See Back of Form CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Committee to Re-elect Helen Miller Reset Form A (Rev. 07/03) CHECK THIS BOX IF AMENDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10/2/10	^{ID#} 6056 CK# ₄₀₀₀	Iowa Bankers Assoc - PAC 8800 NW 62nd Ave Johnston, IA 50131		\$500.00	1
10/2/10	ID# CK# 3185	Iowans for a Skilled Workforce 707 East Locust St Des Moines, IA 50309		250.00	1
10/2/10	6101 CK# 3640	Truck PAC Iowa P O Box 6121, East Des Moines Stn. Des Moines, IA 50309		250.00	1
10/2/10	ID# CK# 5520	W Thomas & Carline Phillips 31398 Chardonnay Point Waukee, IA 59263		50.00	
10/2/10	ID# 9716 CK# 2276	IBEW Local 347 PAC 850 18th St Des Moines, IA 50314		250.00	1
10/2/10	ID# 6062 CK# 490	Iowa Certified Public Accountants 950 Office Park Rd, Suite 300 West Des Moines, IA 50265		200.00	1
10/2/10	6439 CK# ₂₀₇₅	CWA Council of State of Iowa COPE Fund		100.00	1
10/2/10	ID# CK# ₃₀₂₃	Dean Polking 1435 1st Ave No Fort Dodge, IA 50501		50.00	1
10/2/10	ID# 6089 CK# 1044	Operating Engineers Local 234 - PAC 4880 Hubbell Des Moines, IA 50317		500.00	1
	ID# CK# *				
			SUB-TOTAL	\$ 2,150.00	

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Page 7 of 7 (for Schedule A)

Reset	Form	- Partie

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES	
CHECK THIS BOX IF		

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-elect Helen Miller

CK#3206	DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
Helen Miller 1936 15th Avenue North Fort Dodge, IA 50501 ID#	7/18/10		1936 15th Avenue North	postage and office supplies	\$ 175.02
CK# 3208	7/18/10		1936 15th Avenue North	reimbursement for payment of pulled pork & buns for launch party	50.00
CK#3209 CK#3209 CK#3209 CK#3210 CK#3210 CK#3211 CK#3211 CK#3211 CK#3211 CK#3212 CK#3	7/21/10	"	P O Box 244	work on campaign	200.00
CK#3210	8/6/10		2200 Central Avenue	note cards & envelopes	211.49
CK#3211 Felen Miller reimbursement for IPAD and accessories 855.72 ID#	3/23/10		P O Box 244	work on campaign	200.00
CK#3212 Jift Print #10 envelopes and re-elect return envelopes 124.39 ID# VOID	3/23/10	CK#3211	1936 15th Avenue North		855.72
VOID	3/23/10		2200 Central Avenue	#10 envelopes and re-elect return envelopes	124.39
			VOID		

SUB-TOTAL \$ 1,816.62

TOTAL (if last page of this schedule) \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page	1	of	3	

(for Schedule B)

Reset	Form	

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

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SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES			
CHECK THIS BOX IF				

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-elect Helen Miller

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/16/10	ID# CK#3214	Heather Strachan P O Box 244 Humboldt, IA 50548	work on campaign	\$ 200.00
9/16/10	ID# CK#3215	Helen Miller 1936 15th Avenue North Fort Dodge, IA 50501	stamps (\$176) & food for fundraiser (\$92.38)	268.38
9/16/10	ID# CK# 3216	Helen Miller 1936 15th Avenue North Fort Dodge, IA 50501	reimbursement for NGP campaign office software	480.00
0/22/10	ID# CK# ₃₂₁₇	Jifi Print 2200 Central Avenue Fort Dodge, IA 50501	printing of thank you's	39.59
9/22/10	ID# CK# ₃₂₁₈	Fort Dodge Area Chamber of Commerce 1406 Central Ave., P O Box T Fort Dodge, IA 50501	year membership	140.00
)/22/10	ID# CK#3219	Truman Fund 5661 Fleur Drive Des Moines, IA 50321	contribution	3,000.00
/23/10	ID# CK# ₃₂₂₀	Helen Miller 1936 15th Ave. No. Fort Dodge, IA 50501	stamps (\$44) food & supplies for fundraiser (\$63.33)	107.33
0/3/10	ID# CK# 3221	Carter Printing 1739 East Grand Avenue Des Moines, IA 50316	postcards	237.44
			SUB-TOTAL	\$ 4,472.74
			TOTAL (if last name of this cohortels)	

TOTAL (if last page of this schedule) | \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page 2	of	3	

Reset Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES		
CHECK THIS BOX IF AMENDING FORM			

COMMITTEE NAME (Must be same as on Statement of Organization
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Committee to Re-elect Helen Miller

DATE	CANDIDATE	NAME AND ADDRESS TO WHOM	PURPO	SF	ANGUINE
EXPENDED (MM/DD/YR)	ID NUMBER (if applicable) AND PAC CHECK NUMBER	EXPENDITURE (Disbursement) WAS MADE	(DESCRIBE TRA	NSACTION)	AMOUNT EXPENDED
	ID#				
10/7/10	CK#3222	House Truman Fund 5661 Fleur Drive Des Moines, IA 50321	mailing expense		\$ 3,200.00
	ID#	II-A C. 1			<u> </u>
10/9/10	CK# 3223	Heather Strachan P O Box 244 Humboldt, IA 50548	work on campaign	•	300.00
	ID#	Tawny Thoma			
10/9/10	CK# 3224	521 S 12th St Apt 2 Fort Dodge, IA 50501	canvassing services an placement services	d sign	250.00
	ID#	ActBlue Technical Services			
7/27/10	CK#	P O Box 283110 Cambridge, MA 02238-2110	contribution processing	g fee	0.99
	ID#				
	CK#				
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	CK#		ı		
				CUD TOTAL	

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 3,750.99 \$ 10,040.35

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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Page	•	nf		

FOR INSTRUCTIONS SEE BACK OF EC	CODE
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COMMITTEE NAME (Must be same as on Statement of Organization) Committee to Re-elect Helen Miller	E (Rev. 06/97)	IN-KIND
Reset Form		(THIS BOX IF DING FORM

DATE	1	DELATIONEL NO	DECODIDE		
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
8/29/10	David Hearn 1264 7th Ave No Fort Dodge, IA 50501	·	music for fundraiser	\$ 175.00	✓
9/9/10	House Truman Fund 5661 Fleur Drive Des Moines, IA 50321		postage and invitations for PAC event	20.00	V
-					
			SUB-TOTAL	\$ 195.00	
	è		TOTAL (if last	\$	
			page of this schedule)	195.00	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)

RESET

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Re-elect Helen Miller

SCHEDULE H (Rev. 02/08)

CAMPAIGN PROPERTY

ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.

CHECK THIS BOX IF **AMENDING FORM**

PAR	TI-	ONGOING	INVENTORY	OF CAMPAIG	N DDODEDTO
		CHICCHIC	MATCHINKI	Ur Campan-	N

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
7/23/09	Computer	1612.93	1075.29
1/23/10	Scanner	184.43	184.43
8/23/10	IPAD & accessories for same	855.72	855.72

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 2,115.44

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation
	:				

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$	
(Attach Additional Schedules if Needed)	
	PageofPages (For Schedule H)

TOTALS

^{*} If estimated, show est. beside figure.